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| 23117 | 7590 01/07 | /2010 | | Cert | ificate of Ma | iling or Transr | nission | | | | | | | | |
| NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203 1/21/2010 SDIRETA2 00000001 10566839 | | | | I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name) | | | | | | | | | | | |
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| APPLICATION NO. | 15.00 FILING DATE | UP | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. | | | | | | | | |
| 10/566,839 02/07/2007 | | | Edwin Ijpeij | | 4662-145 7520 | | | | | | | | | | |
| TITLE OF INVENTION LIGAND | : PROCESS FOR THI | E PREPARATION OF | AN METAL-ORGANIC | COMPOUND COM | IPRISING A | T LEAST ON | EIMINE | | | | | | | | |
| LIGAND | | | | | | | | | | | | | | | |
| APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE | FEE TOT | AL FEE(S) DUE | DATE DUE | | | | | | | | |
| nonprovisional | NO NO | \$1510 | \$300 | \$0 | | \$1810 | 04/07/2010 | | | | | | | | |
| | | | CLASS-SUBCLASS | 1 | | | | | | | | | | | |
| EXAMINER | | ART UNIT | <u>. </u> | J | | | | | | | | | | | |
| LU, C C | | 1796 | 526-161000 | estant front nogo, list | | | | | | | | | | | |
| 1. Change of corresponde CFR 1.363). | | | 2. For printing on the p (1) the names of up to | 3 registered patent | | Nixon & | Vanderhye, P. | | | | | | | | |
| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer | | | or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 | | | | | | | | | | | | |
| | | | | | | | | Number is required. | | | listed, no name will be | printed. | | | |
| 3. ASSIGNEE NAME A | ND RESIDENCE DATA | A TO BE PRINTED ON | THE PATENT (print or ty | pe) | in identific | d halow the de | soument has been filed for | | | | | | | | |
| PLEASE NOTE: Unl recordation as set fort | less an assignee is ident h in 37 CFR 3.11. Com | offied below, no assigned pletion of this form is NC | data will appear on the p OT a substitute for filing an | | | a below, the ac | beument has been med to | | | | | | | | |
| (A) NAME OF ASSIG | GNEE | | (B) RESIDENCE: (CITY | and STATE OR C | OUNTRY) | | | | | | | | | | |
| DSM IP AS | SETS B.V. | | Heerlen, Ne | therlands | | | | | | | | | | | |
| Please check the appropr | iate assignee category or | categories (will not be p | printed on the patent): | Individual 🖾 Co | rporation or o | ther private gro | up entity Government | | | | | | | | |
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| Authorized Signature | - UV | | | | | | | | | | | | | | |

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